Based on Spending Breakdown by Claim

Hospital Name	Provider Number	State
HOSPITAL OF ST RAPHAEL	070001	СТ
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT

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Based on Spending Breakdown by Claim

Period	Claim Type
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility

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Based on Spending Breakdown by Claim

Avg Spending Per Episode (Hospital)	Avg Spending Per Episode (State)	Avg Spending Per Episode (Nation)
\$21.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$23.00	\$4.00	\$7.00
\$32.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$6.00	\$7.00	\$9.00
\$236.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$19.00	\$9.00	\$16.00
\$9258.00	\$8735.00	\$9399.00
\$13.00	\$24.00	\$46.00
\$1946.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1946.00	\$1915.00	\$1857.00
\$981.00	\$781.00	\$715.00
\$88.00	\$70.00	\$88.00
\$1856.00	\$1581.00	\$1645.00
\$445.00	\$479.00	\$558.00
\$2405.00	\$2310.00	\$1646.00

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Based on Spending Breakdown by Claim

Sacra on openialing Breakdown by Claim	
Percent of Spending (Hospital)	Percent of Spending (State)
0.1%	0.07%
0%	0%
0.11%	0.02%
0.15%	0.16%
0.01%	0.02%
0.03%	0.03%
1.15%	0.78%
0.05%	0.05%
0.09%	0.05%
45.12%	45.63%
0.06%	0.13%
9.48%	10.18%
0.1%	0.09%
9.48%	10%
4.78%	4.08%
0.43%	0.37%
9.04%	8.26%
2.17%	2.5%
11.72%	12.07%

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Based on Spending Breakdown by Claim

Based on Spending Breakdown by	Olalin
Percent of Spending	(Nation)
	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
	6.43%
	0.15%
	10.04%
	3.86%
	0.47%
	8.89%
•	3.02%
	8.89%

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Based on Spending Breakdown by Claim

,		
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
HOSPITAL OF ST RAPHAEL	070001	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient

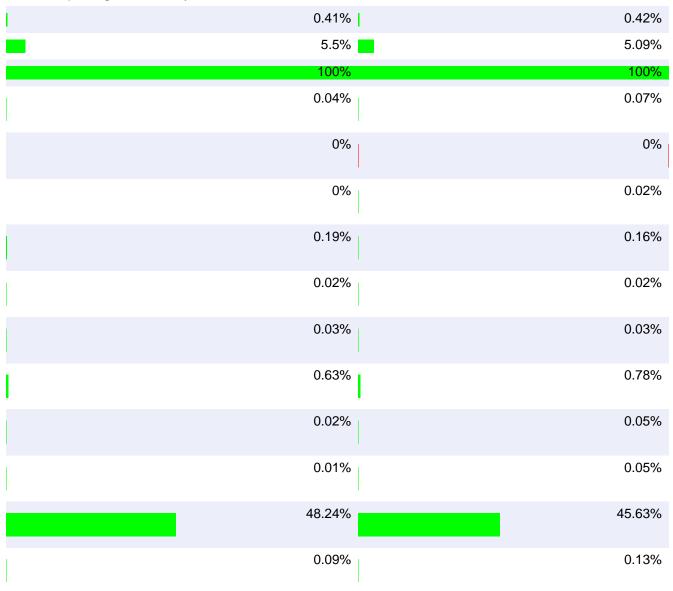
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Based on Spending Breakdown by Claim

		based on opending breakdown by Claim
\$110.00	\$80.00	\$84.00
\$966.00	\$974.00	\$1128.00
\$18506.00	\$19142.00	\$20519.00
\$14.00	\$13.00	\$7.00
\$1.00	\$0.00	\$0.00
\$7.00	\$4.00	\$1.00
\$40.00	\$31.00	\$39.00
\$3.00	\$3.00	\$4.00
\$9.00	\$7.00	\$6.00
\$155.00	\$150.00	\$127.00
\$14.00	\$9.00	\$4.00
\$16.00	\$9.00	\$2.00
\$9399.00	\$8735.00	\$9817.00
\$46.00	\$24.00	\$19.00

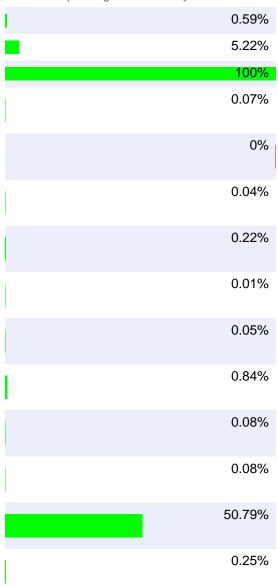
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

DAY KIMBALL HOSPITAL

CENTER		
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	СТ
ST FRANCIS HOSPITAL & MEDICAL CENTER	070002	CT
DAY KIMBALL HOSPITAL	070003	CT

070003

CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice

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Based on Spending Breakdown by Claim

\$1984.00	\$1949.00	\$1190.00
\$12.00	\$18.00	\$27.00
\$2195.00	\$1915.00	\$1857.00
\$907.00	\$781.00	\$715.00
\$46.00	\$70.00	\$88.00
\$1451.00	\$1581.00	\$1645.00
\$493.00	\$479.00	\$558.00
\$2305.00	\$2310.00	\$1646.00
\$84.00	\$80.00	\$110.00
\$848.00	\$974.00	\$966.00
\$20351.00	\$19142.00	\$18506.00
\$5.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00

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Based on Spending Breakdown by Claim

based on Spending Breakdown by Glaim	
9.75%	10.18%
0.06%	0.09%
10.79%	10%
4.46%	4.08%
0.23%	0.37%
7.13%	8.26%
2.42%	2.5%
11.32%	12.07%
0.41%	0.42%
4.17%	5.09%
100%	100%
0.03%	0.07%
0%	0%

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Based on Spending Breakdown by Claim

1	
•	6.43%
	0.15%
	10.04%
I	3.86%
	0.47%
	8.89%
I	3.02%
	8.89%
	0.59%
	5.22%
	100%
	0.07%
	0%

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Based on Spending Breakdown by Claim

3		
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
DAY KIMBALL HOSPITAL	070003	CT
SHARON HOSPITAL	070004	CT

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency

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Based on Spending Breakdown by Claim

\$1.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$167.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$3.00	\$9.00	\$16.00
\$6441.00	\$8735.00	\$9399.00
\$4.00	\$24.00	\$46.00
\$2440.00	\$1949.00	\$1190.00
\$13.00	\$18.00	\$27.00
\$1432.00	\$1915.00	\$1857.00
\$513.00	\$781.00	\$715.00
\$54.00	\$70.00	\$88.00
\$1208.00	\$1581.00	\$1645.00
\$365.00	\$479.00	\$558.00
\$2844.00	\$2310.00	\$1646.00
\$42.00	\$80.00	\$110.00
\$674.00	\$974.00	\$966.00
\$16261.00	\$19142.00	\$18506.00
\$0.00	\$13.00	\$14.00

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Based on Spending Breakdown by Claim

	İ	
	0.09%	0.02%
	0.16%	0.16%
	0.01%	0.02%
	0.03%	0.03%
I	1.03%	0.78%
	0.06%	0.05%
	0.02%	0.05%
	39.61%	45.63%
	0.02%	0.13%
	15%	10.18%
l	0.08%	0.09%
	8.81%	10%
	3.15%	4.08%
1	0.33%	0.37%
	7.43%	8.26%
	2.25%	2.5%
	17.49%	12.07%
	0.26%	0.42%
	4.14%	5.09%
	100%	100%
	0%	0.07%

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Based on Spending Breakdown by Claim

	0.04%
	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
	6.43%
	0.15%
	10.04%
	3.86%
	0.47%
	8.89%
	3.02%
	8.89%
	0.59%
	5.22%
	100%
	0.07%

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Based on Spending Breakdown by Claim

SHARON HOSPITAL	070004	СТ
SHARON HOSPITAL	070004	CT

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total

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Based on Spending Breakdown by Claim

\$0.00	\$0.00	\$1.00
\$4.00	\$4.00	\$7.00
\$8.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$4.00	\$7.00	\$9.00
\$95.00	\$150.00	\$155.00
\$0.00	\$9.00	\$14.00
\$0.00	\$9.00	\$16.00
\$6491.00	\$8735.00	\$9399.00
\$9.00	\$24.00	\$46.00
\$1872.00	\$1949.00	\$1190.00
\$10.00	\$18.00	\$27.00
\$1211.00	\$1915.00	\$1857.00
\$497.00	\$781.00	\$715.00
\$71.00	\$70.00	\$88.00
\$1290.00	\$1581.00	\$1645.00
\$392.00	\$479.00	\$558.00
\$2481.00	\$2310.00	\$1646.00
\$64.00	\$80.00	\$110.00
\$685.00	\$974.00	\$966.00
\$15187.00	\$19142.00	\$18506.00

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Based on Spending Breakdown by Claim

0%	0%
0.03%	0.02%
0.05%	0.16%
0.02%	0.02%
0.03%	0.03%
0.62%	0.78%
0%	0.05%
0%	0.05%
42.74%	45.63%
0.06%	0.13%
12.32%	10.18%
0.07%	0.09%
7.97%	10%
3.27%	4.08%
0.47%	0.37%
8.5%	8.26%
2.58%	2.5%
16.34%	12.07%
0.42%	0.42%
4.51%	5.09%
100%	100%

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Based on Spending Breakdown by Claim

0% 0.04% 0.22% 0.01% 0.05% 0.84% 0.08% 0.08% 50.79% 0.25% 6.43% 0.15% 10.04% 3.86% 0.47% 8.89% 3.02% 8.89% 0.59% 5.22% 100%

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Based on Spending Breakdown by Claim

WATERBURY HOSPITAL	070005	CT
WATERBURY HOSPITAL	070005	CT

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier

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Based on Spending Breakdown by Claim

\$13.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$23.00	\$31.00	\$40.00
\$4.00	\$3.00	\$3.00
\$8.00	\$7.00	\$9.00
\$191.00	\$150.00	\$155.00
\$15.00	\$9.00	\$14.00
\$7.00	\$9.00	\$16.00
\$9167.00	\$8735.00	\$9399.00
\$9.00	\$24.00	\$46.00
\$2115.00	\$1949.00	\$1190.00
\$11.00	\$18.00	\$27.00
\$1941.00	\$1915.00	\$1857.00
\$826.00	\$781.00	\$715.00
\$31.00	\$70.00	\$88.00
\$1802.00	\$1581.00	\$1645.00
\$406.00	\$479.00	\$558.00
\$2337.00	\$2310.00	\$1646.00
\$60.00	\$80.00	\$110.00
\$1044.00	\$974.00	\$966.00

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Based on Spending Breakdown by Claim

	0.07%	0.07%
	0%	0%
	0%	0.02%
	0.12%	0.16%
	0.02%	0.02%
	0.04%	0.03%
	0.96%	0.78%
	0.08%	0.05%
	0.03%	0.05%
	45.81%	45.63%
	0.04%	0.13%
	10.57%	10.18%
	0.06%	0.09%
	9.7%	10%
	4.13%	4.08%
	0.16%	0.37%
	9.01%	8.26%
.	2.03%	2.5%
	11.68%	12.07%
	0.3%	0.42%
	5.22%	5.09%

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Based on Spending Breakdown by Claim

I	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
•	6.43%
	0.15%
	10.04%
	3.86%
l	0.47%
	8.89%
•	3.02%
	8.89%
I	0.59%
	5.22%

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Based on Spending Breakdown by Claim

WATERBURY HOSPITAL	070005	СТ
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	CT
STAMFORD HOSPITAL	070006	СТ

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Based on Spending Breakdown by Claim

Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment

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Based on Spending Breakdown by Claim

\$20012.00	\$19142.00	\$18506.00
\$17.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$5.00	\$4.00	\$7.00
\$22.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$210.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$11.00	\$9.00	\$16.00
\$8934.00	\$8735.00	\$9399.00
\$15.00	\$24.00	\$46.00
\$1852.00	\$1949.00	\$1190.00
\$19.00	\$18.00	\$27.00
\$2080.00	\$1915.00	\$1857.00
\$642.00	\$781.00	\$715.00
\$80.00	\$70.00	\$88.00
\$1417.00	\$1581.00	\$1645.00
\$517.00	\$479.00	\$558.00
\$2565.00	\$2310.00	\$1646.00
\$73.00	\$80.00	\$110.00

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Based on Spending Breakdown by Claim

Dassa on openang Broakdown by Glaim	_	
	100%	100%
	0.09%	0.07%
	0%	0%
	0.03%	0.02%
I	0.11%	0.16%
	0.02%	0.02%
I	0.03%	0.03%
1	1.07%	0.78%
I	0.05%	0.05%
	0.05%	0.05%
	45.6%	45.63%
	0.08%	0.13%
	9.45%	10.18%
	0.1%	0.09%
	10.62%	10%
	3.27%	4.08%
I	0.41%	0.37%
	7.23%	8.26%
	2.64%	2.5%
	13.09%	12.07%
I	0.37%	0.42%

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Based on Spending Breakdown by Claim

	100%
	0.07%
	0%
	0.04%
1	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%
	0.08%
	50.79%
1	0.25%
	6.43%
	0.15%
	10.04%
•	3.86%
1	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%

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Based on Spending Breakdown by Claim

STAMFORD HOSPITAL	070006	СТ
STAMFORD HOSPITAL	070006	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	СТ

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility

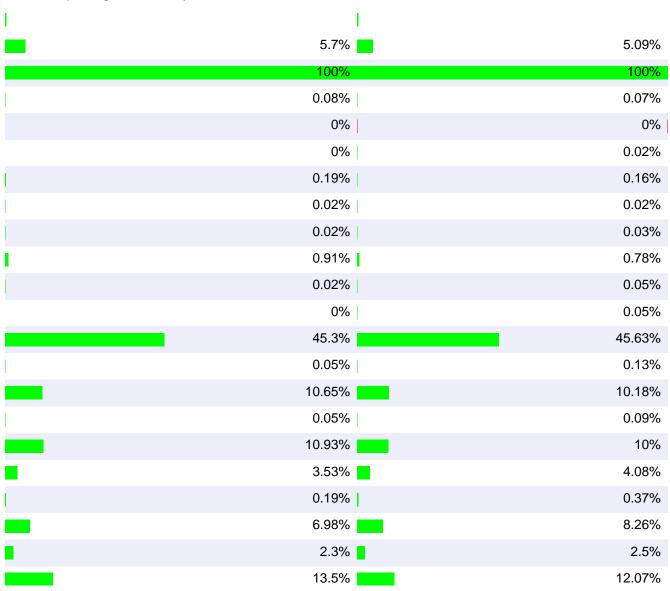
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Based on Spending Breakdown by Claim

\$1116.00	\$974.00	\$966.00
\$19594.00	\$19142.00	\$18506.00
\$15.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$35.00	\$31.00	\$40.00
\$4.00	\$3.00	\$3.00
\$4.00	\$7.00	\$9.00
\$170.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$0.00	\$9.00	\$16.00
\$8522.00	\$8735.00	\$9399.00
\$10.00	\$24.00	\$46.00
\$2004.00	\$1949.00	\$1190.00
\$10.00	\$18.00	\$27.00
\$2057.00	\$1915.00	\$1857.00
\$665.00	\$781.00	\$715.00
\$36.00	\$70.00	\$88.00
\$1313.00	\$1581.00	\$1645.00
\$432.00	\$479.00	\$558.00
\$2541.00	\$2310.00	\$1646.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

5.22% 100% 0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84% 0.08% 0.08% 50.79% 0.25% 6.43% 0.15% 10.04% 3.86% 0.47% 8.89% 3.02% 8.89%

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Based on Spending Breakdown by Claim

LAWRENCE & MEMORIAL HOSPITAL	070007	СТ
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
LAWRENCE & MEMORIAL HOSPITAL	070007	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	СТ

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient

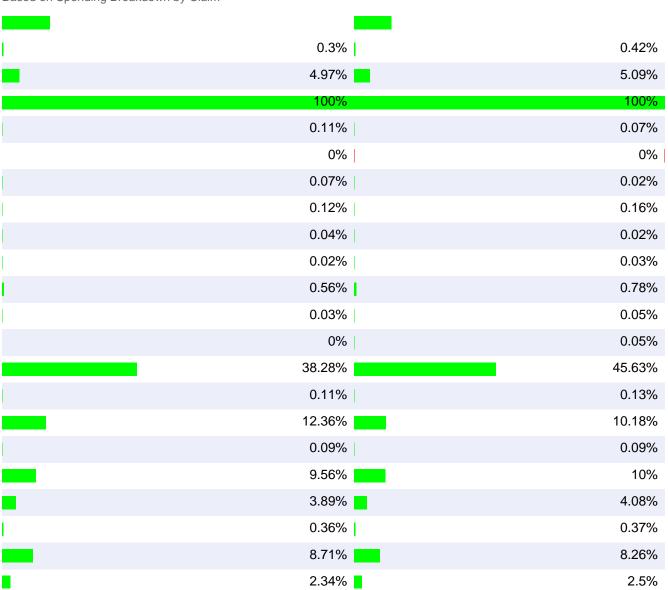
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Based on Spending Breakdown by Claim

\$1694.00 \$455.00	\$1581.00	\$1645.00 \$558.00
\$1694.00	\$1581.00	\$1645.00
\$70.00	\$70.00	\$88.00
\$757.00	\$781.00	\$715.00
\$1860.00	\$1915.00	\$1857.00
\$18.00	\$18.00	\$27.00
\$2404.00	\$1949.00	\$1190.00
\$21.00	\$24.00	\$46.00
\$7447.00	\$8735.00	\$9399.00
\$0.00	\$9.00	\$16.00
\$5.00	\$9.00	\$14.00
\$108.00	\$150.00	\$155.00
\$4.00	\$7.00	\$9.00
\$7.00	\$3.00	\$3.00
\$23.00	\$31.00	\$40.00
\$13.00	\$4.00	\$7.00
\$0.00	\$0.00	\$1.00
\$22.00	\$13.00	\$14.00
\$18813.00	\$19142.00	\$18506.00
\$935.00	\$974.00	\$966.00
\$56.00	\$80.00	\$110.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

JOHNSON MEMORIAL HOSPITAL	070008	СТ
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
JOHNSON MEMORIAL HOSPITAL	070008	CT
BRIDGEPORT HOSPITAL	070010	CT

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility	
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment	
1 through 30 days After Discharge from Index Hospital Admission	Carrier	
Complete Episode	Total	
1 to 3 days Prior to Index Hospital Admission	Home Health Agency	
1 to 3 days Prior to Index Hospital Admission	Hospice	
1 to 3 days Prior to Index Hospital Admission	Inpatient	
1 to 3 days Prior to Index Hospital Admission	Outpatient	
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility	
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment	
1 to 3 days Prior to Index Hospital Admission	Carrier	
During Index Hospital Admission	Home Health Agency	
During Index Hospital Admission	Hospice	
During Index Hospital Admission	Inpatient	
During Index Hospital Admission	Outpatient	
During Index Hospital Admission	Skilled Nursing Facility	
During Index Hospital Admission	Durable Medical Equipment	
During Index Hospital Admission	Carrier	
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency	
1 through 30 days After Discharge from Index Hospital Admission	Hospice	
1 through 30 days After Discharge from Index Hospital Admission	Inpatient	

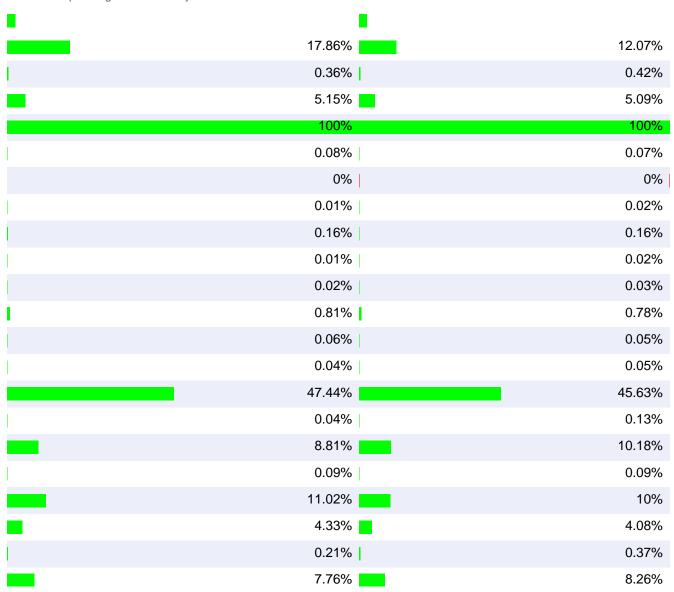
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Based on Spending Breakdown by Claim

\$3475.00	\$2310.00	\$1646.00
\$69.00	\$80.00	\$110.00
\$1003.00	\$974.00	\$966.00
\$19455.00	\$19142.00	\$18506.00
\$17.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$2.00	\$4.00	\$7.00
\$34.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$169.00	\$150.00	\$155.00
\$12.00	\$9.00	\$14.00
\$8.00	\$9.00	\$16.00
\$9906.00	\$8735.00	\$9399.00
\$8.00	\$24.00	\$46.00
\$1840.00	\$1949.00	\$1190.00
\$19.00	\$18.00	\$27.00
\$2301.00	\$1915.00	\$1857.00
\$905.00	\$781.00	\$715.00
\$44.00	\$70.00	\$88.00
\$1620.00	\$1581.00	\$1645.00

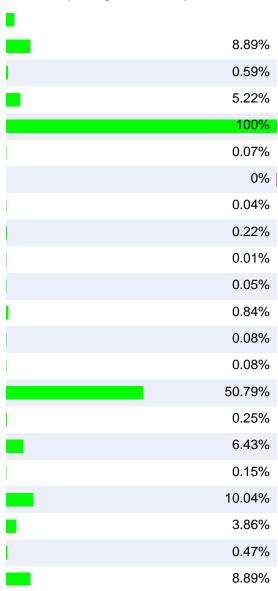
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

BRIDGEPORT HOSPITAL	070010	СТ
BRIDGEPORT HOSPITAL	070010	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	CT
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice

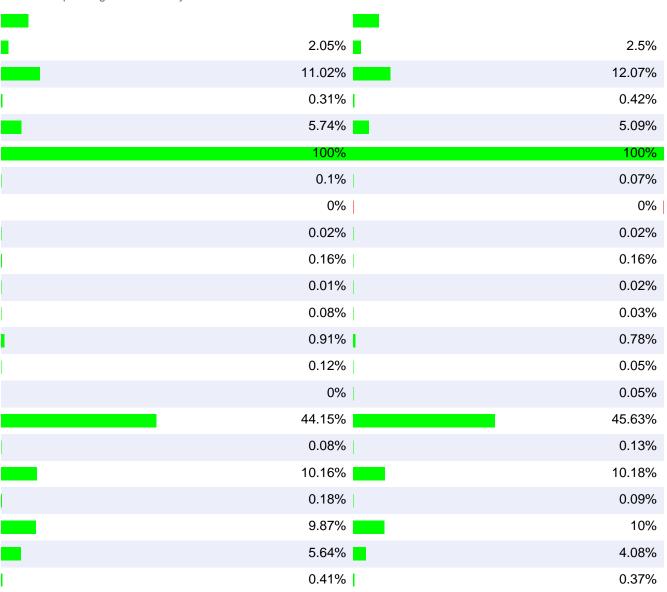
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Based on Spending Breakdown by Claim

\$429.00	\$479.00	\$558.00
\$2302.00	\$2310.00	\$1646.00
\$64.00	\$80.00	\$110.00
\$1198.00	\$974.00	\$966.00
\$20884.00	\$19142.00	\$18506.00
\$18.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$3.00	\$4.00	\$7.00
\$28.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$15.00	\$7.00	\$9.00
\$160.00	\$150.00	\$155.00
\$21.00	\$9.00	\$14.00
\$0.00	\$9.00	\$16.00
\$7748.00	\$8735.00	\$9399.00
\$15.00	\$24.00	\$46.00
\$1782.00	\$1949.00	\$1190.00
\$31.00	\$18.00	\$27.00
\$1732.00	\$1915.00	\$1857.00
\$989.00	\$781.00	\$715.00
\$73.00	\$70.00	\$88.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
CHARLOTTE HUNGERFORD HOSPITAL	070011	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	СТ

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency

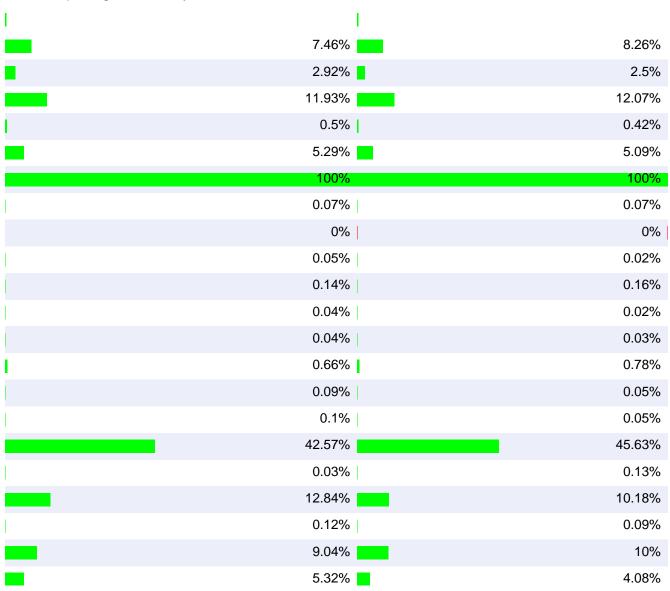
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Based on Spending Breakdown by Claim

\$976.00	\$781.00	\$715.00
\$1659.00	\$1915.00	\$1857.00
\$22.00	\$18.00	\$27.00
\$2356.00	\$1949.00	\$1190.00
\$5.00	\$24.00	\$46.00
\$7811.00	\$8735.00	\$9399.00
\$19.00	\$9.00	\$16.00
\$17.00	\$9.00	\$14.00
\$120.00	\$150.00	\$155.00
\$8.00	\$7.00	\$9.00
\$8.00	\$3.00	\$3.00
\$26.00	\$31.00	\$40.00
\$8.00	\$4.00	\$7.00
\$0.00	\$0.00	\$1.00
\$12.00	\$13.00	\$14.00
\$17547.00	\$19142.00	\$18506.00
\$929.00	\$974.00	\$966.00
\$87.00	\$80.00	\$110.00
\$2093.00	\$2310.00	\$1646.00
\$513.00	\$479.00	\$558.00
\$1309.00	\$1581.00	\$1645.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

I	
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
•	6.43%
	0.15%
	10.04%
	3.86%

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Based on Spending Breakdown by Claim

ROCKVILLE GENERAL HOSPITAL	070012	СТ
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
ROCKVILLE GENERAL HOSPITAL	070012	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
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NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier

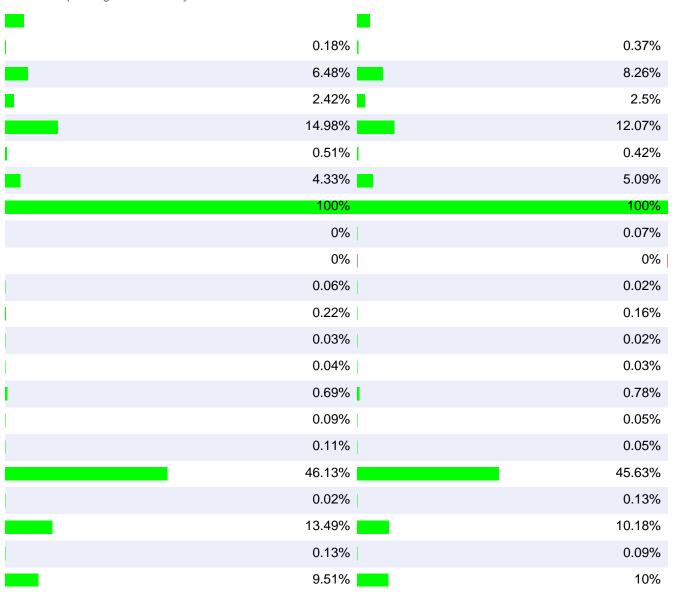
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Based on Spending Breakdown by Claim

\$34.00	\$70.00	\$88.00
\$1188.00	\$1581.00	\$1645.00
\$443.00	\$479.00	\$558.00
\$2748.00	\$2310.00	\$1646.00
\$93.00	\$80.00	\$110.00
\$794.00	\$974.00	\$966.00
\$18348.00	\$19142.00	\$18506.00
\$0.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$10.00	\$4.00	\$7.00
\$39.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$124.00	\$150.00	\$155.00
\$16.00	\$9.00	\$14.00
\$20.00	\$9.00	\$16.00
\$8353.00	\$8735.00	\$9399.00
\$4.00	\$24.00	\$46.00
\$2444.00	\$1949.00	\$1190.00
\$23.00	\$18.00	\$27.00
\$1723.00	\$1915.00	\$1857.00

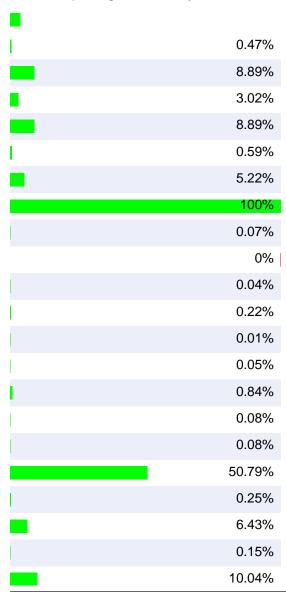
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
NEW MILFORD HOSPITAL	070015	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
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SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	СТ

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment

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Based on Spending Breakdown by Claim

\$622.00	\$781.00	\$715.00
\$54.00	\$70.00	\$88.00
\$983.00	\$1581.00	\$1645.00
\$458.00	\$479.00	\$558.00
\$2446.00	\$2310.00	\$1646.00
\$77.00	\$80.00	\$110.00
\$701.00	\$974.00	\$966.00
\$18109.00	\$19142.00	\$18506.00
\$14.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$22.00	\$31.00	\$40.00
\$0.00	\$3.00	\$3.00
\$6.00	\$7.00	\$9.00
\$136.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$10.00	\$9.00	\$16.00
\$8383.00	\$8735.00	\$9399.00
\$5.00	\$24.00	\$46.00
\$2042.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00

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Based on Spending Breakdown by Claim

	4.000/
3.44%	4.08%
0.3%	0.37%
5.43%	8.26%
2.53%	2.5%
13.51%	12.07%
0.43%	0.42%
3.87%	5.09%
100%	100%
0.07%	0.07%
0%	0%
0%	0.02%
0.12%	0.16%
0%	0.02%
0.03%	0.03%
0.73%	0.78%
0.06%	0.05%
0.05%	0.05%
44.94%	45.63%
0.02%	0.13%
10.95%	10.18%
0.11%	0.09%

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Based on Spending Breakdown by Claim

	3.86%
	0.47%
	8.89%
•	3.02%
	8.89%
l	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.05%
L	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
•	6.43%
	0.15%

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Based on Spending Breakdown by Claim

SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
SAINT MARYS HOSPITAL	070016	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	СТ
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	СТ

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility

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Based on Spending Breakdown by Claim

\$1905.00	\$1915.00	\$1857.00
\$810.00	\$781.00	\$715.00
\$58.00	\$70.00	\$88.00
\$1434.00	\$1581.00	\$1645.00
\$329.00	\$479.00	\$558.00
\$2377.00	\$2310.00	\$1646.00
\$91.00	\$80.00	\$110.00
\$1001.00	\$974.00	\$966.00
\$18652.00	\$19142.00	\$18506.00
\$16.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$2.00	\$4.00	\$7.00
\$17.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$4.00	\$7.00	\$9.00
\$146.00	\$150.00	\$155.00
\$5.00	\$9.00	\$14.00
\$0.00	\$9.00	\$16.00
\$8133.00	\$8735.00	\$9399.00
\$9.00	\$24.00	\$46.00
\$2298.00	\$1949.00	\$1190.00

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Based on Spending Breakdown by Claim

10.21%	10%
4.34%	4.08%
0.31%	0.37%
7.69%	8.26%
1.76%	2.5%
12.74%	12.07%
0.49%	0.42%
5.37%	5.09%
100%	100%
0.08%	0.07%
0%	0%
0.01%	0.02%
0.09%	0.16%
0.01%	0.02%
0.02%	0.03%
0.76%	0.78%
0.03%	0.05%
0%	0.05%
42.62%	45.63%
0.05%	0.13%
12.04%	10.18%

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Based on Spending Breakdown by Claim

	10.04%
•	3.86%
1	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%
1	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%
	0.08%
	50.79%
	0.25%

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Based on Spending Breakdown by Claim

MIDSTATE MEDICAL CENTER	070017	СТ
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
MIDSTATE MEDICAL CENTER	070017	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient

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Based on Spending Breakdown by Claim

\$8.00	\$18.00	\$27.00
\$1839.00	\$1915.00	\$1857.00
\$815.00	\$781.00	\$715.00
\$44.00	\$70.00	\$88.00
\$1741.00	\$1581.00	\$1645.00
\$411.00	\$479.00	\$558.00
\$2456.00	\$2310.00	\$1646.00
\$57.00	\$80.00	\$110.00
\$1081.00	\$974.00	\$966.00
\$19086.00	\$19142.00	\$18506.00
\$7.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$7.00	\$4.00	\$7.00
\$19.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$4.00	\$7.00	\$9.00
\$158.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$16.00	\$9.00	\$16.00
\$8004.00	\$8735.00	\$9399.00
\$13.00	\$24.00	\$46.00

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Based on Spending Breakdown by Claim

	<u>_</u>	
	0.049/	0.000/
	0.04%	0.09%
	9.64%	10%
	4.27%	4.08%
	0.23%	0.37%
	9.12%	8.26%
ı	2.15%	2.5%
	12.87%	12.07%
	0.3%	0.42%
	5.66%	5.09%
	100%	100%
	0.04%	0.07%
	0.04%	0.07% 0%
	· · · · · · · · · · · · · · · · · · ·	
	0%	0%
	0% 0.04%	0% 0.02%
	0% 0.04% 0.11%	0% 0.02% 0.16%
	0% 0.04% 0.11% 0.01%	0% 0.02% 0.16% 0.02%
	0% 0.04% 0.11% 0.01% 0.03%	0% 0.02% 0.16% 0.02% 0.03%
	0% 0.04% 0.11% 0.01% 0.03% 0.93%	0% 0.02% 0.16% 0.02% 0.03% 0.78%
	0% 0.04% 0.11% 0.01% 0.03% 0.93% 0.02%	0% 0.02% 0.16% 0.02% 0.03% 0.78% 0.05%

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Based on Spending Breakdown by Claim

	0.15%
	10.04%
	3.86%
I	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	0.07%
	0.07%
	0.07% 0%
	0.07% 0% 0.04%
	0.07% 0% 0.04% 0.22%
	0.07% 0% 0.04% 0.22% 0.01%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84% 0.08%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84% 0.08%

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Based on Spending Breakdown by Claim

GREENWICH HOSPITAL ASSOCIATION	070018	СТ
GREENWICH HOSPITAL ASSOCIATION	070018	СТ
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
GREENWICH HOSPITAL ASSOCIATION	070018	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient

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Based on Spending Breakdown by Claim

\$1653.00	\$1949.00	\$1190.00
\$13.00	\$18.00	\$27.00
\$1760.00	\$1915.00	\$1857.00
\$776.00	\$781.00	\$715.00
\$64.00	\$70.00	\$88.00
\$1341.00	\$1581.00	\$1645.00
\$414.00	\$479.00	\$558.00
\$1814.00	\$2310.00	\$1646.00
\$59.00	\$80.00	\$110.00
\$906.00	\$974.00	\$966.00
\$17035.00	\$19142.00	\$18506.00
\$21.00	\$13.00	\$14.00
\$1.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$33.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$145.00	\$150.00	\$155.00
\$26.00	\$9.00	\$14.00
\$30.00	\$9.00	\$16.00
\$8346.00	\$8735.00	\$9399.00

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Based on Spending Breakdown by Claim

	9.7%	10.18%
	0.08%	0.09%
	10.33%	10%
<u> </u>	4.56%	4.08%
I	0.37%	0.37%
	7.87%	8.26%
	2.43%	2.5%
	10.65%	12.07%
I	0.35%	0.42%
	5.32%	5.09%
	100%	100%
	100% 0.1%	100% 0.07%
	0.1%	0.07%
	0.1%	0.07% 0%
	0.1% 0% 0%	0.07% 0% 0.02%
	0.1% 0% 0% 0.16%	0.07% 0% 0.02% 0.16%
	0.1% 0% 0% 0.16% 0.03%	0.07% 0% 0.02% 0.16% 0.02%
	0.1% 0% 0% 0.16% 0.03% 0.03%	0.07% 0% 0.02% 0.16% 0.02% 0.03%
	0.1% 0% 0% 0.16% 0.03% 0.72%	0.07% 0% 0.02% 0.16% 0.02% 0.03% 0.78%

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Based on Spending Breakdown by Claim

	6.43%
	0.15%
	10.04%
	3.86%
1	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	100% 0.07%
	0.07%
	0.07% 0%
	0.07% 0% 0.04%
	0.07% 0% 0.04% 0.22%
	0.07% 0% 0.04% 0.22% 0.01%
	0.07% 0% 0.04% 0.22% 0.01% 0.05%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84%

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Based on Spending Breakdown by Claim

MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	CT
MILFORD HOSPITAL, INC	070019	СТ
MILFORD HOSPITAL, INC	070019	CT
MIDDLESEX HOSPITAL	070020	СТ
MIDDLESEX HOSPITAL	070020	СТ
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice

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Based on Spending Breakdown by Claim

\$15.00	\$24.00	\$46.00
\$2289.00	\$1949.00	\$1190.00
\$17.00	\$18.00	\$27.00
\$2042.00	\$1915.00	\$1857.00
\$962.00	\$781.00	\$715.00
\$161.00	\$70.00	\$88.00
\$1557.00	\$1581.00	\$1645.00
\$366.00	\$479.00	\$558.00
\$2887.00	\$2310.00	\$1646.00
\$76.00	\$80.00	\$110.00
\$1101.00	\$974.00	\$966.00
\$20088.00	\$19142.00	\$18506.00
\$15.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$16.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$3.00	\$7.00	\$9.00
\$131.00	\$150.00	\$155.00
\$6.00	\$9.00	\$14.00
\$34.00	\$9.00	\$16.00

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Based on Spending Breakdown by Claim

Dubble of Openaing Broakdom by Glaim	
0.07%	0.13%
11.4%	10.18%
0.09%	0.09%
10.17%	10%
4.79%	4.08%
0.8%	0.37%
7.75%	8.26%
1.82%	2.5%
14.37%	12.07%
0.38%	0.42%
5.48%	5.09%
100%	100%
0.08%	0.07%
0%	0%
0%	0.02%
0.08%	0.16%
0.01%	0.02%
0.02%	0.03%
0.71%	0.78%
0.03%	0.05%
0.19%	0.05%

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Based on Spending Breakdown by Claim

1	0.25%
	6.43%
	0.15%
	10.04%
	3.86%
1	0.47%
	8.89%
	3.02%
	8.89%
	0.59%
· •	5.22%
	5.22% 100%
	100%
	100% 0.07%
	100% 0.07% 0%
	100% 0.07% 0% 0.04%
	100% 0.07% 0% 0.04% 0.22%
	100% 0.07% 0% 0.04% 0.22% 0.01%
	100% 0.07% 0% 0.04% 0.22% 0.01%

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Based on Spending Breakdown by Claim

MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	СТ
MIDDLESEX HOSPITAL	070020	СТ
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	СТ
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	СТ
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	СТ
MIDDLESEX HOSPITAL	070020	CT
MIDDLESEX HOSPITAL	070020	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH	070021	СТ

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility

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Based on Spending Breakdown by Claim

\$8021.00	\$8735.00	\$9399.00
\$10.00	\$24.00	\$46.00
\$2217.00	\$1949.00	\$1190.00
\$11.00	\$18.00	\$27.00
\$1799.00	\$1915.00	\$1857.00
\$813.00	\$781.00	\$715.00
\$158.00	\$70.00	\$88.00
\$1445.00	\$1581.00	\$1645.00
\$386.00	\$479.00	\$558.00
\$2442.00	\$2310.00	\$1646.00
\$53.00	\$80.00	\$110.00
\$921.00	\$974.00	\$966.00
\$18485.00	\$19142.00	\$18506.00
\$18.00	\$13.00	\$14.00
\$4.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$21.00	\$31.00	\$40.00
\$4.00	\$3.00	\$3.00

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Based on Spending Breakdown by Claim

43.39%	45.63%
0.06%	0.13%
11.99%	10.18%
0.06%	0.09%
9.73%	10%
4.4%	4.08%
0.86%	0.37%
7.82%	8.26%
2.09%	2.5%
13.21%	12.07%
0.29%	0.42%
4.98%	5.09%
100%	100%
0.11%	0.07%
0.03%	0%
0%	0.02%
0.13%	0.16%
0.03%	0.02%

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Based on Spending Breakdown by Claim

	50.79%
	0.25%
	6.43%
	0.15%
	10.04%
•	3.86%
	0.47%
_	8.89%
	3.02%
_	8.89%
I	0.59%
•	5.22%
	100%
	0.07%
	0%
	0.04%
	0.22%

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Based on Spending Breakdown by Claim

. 3		
HOSP		
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient

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Based on Spending Breakdown by Claim

sacca on openang broandown by claim		
\$5.00	\$7.00	\$9.00
\$106.00	\$150.00	\$155.00
\$3.00	\$9.00	\$14.00
\$19.00	\$9.00	\$16.00
\$6718.00	\$8735.00	\$9399.00
\$4.00	\$24.00	\$46.00
\$1957.00	\$1949.00	\$1190.00
\$32.00	\$18.00	\$27.00
\$1538.00	\$1915.00	\$1857.00
\$803.00	\$781.00	\$715.00
\$33.00	\$70.00	\$88.00
\$1183.00	\$1581.00	\$1645.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

based on Spending Breakdown	i by Ciairii
	0.05%
	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
	6.43%
	0.15%
	10.04%
ı	3.86%
	0.47%
	8.89%

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Based on Spending Breakdown by Claim

WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	CT
WINDHAM COMM MEM HOSP & HATCH HOSP	070021	СТ
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	СТ

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Based on Spending Breakdown by Claim

1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission During Index Hospital Admission	Inpatient Outpatient
	•

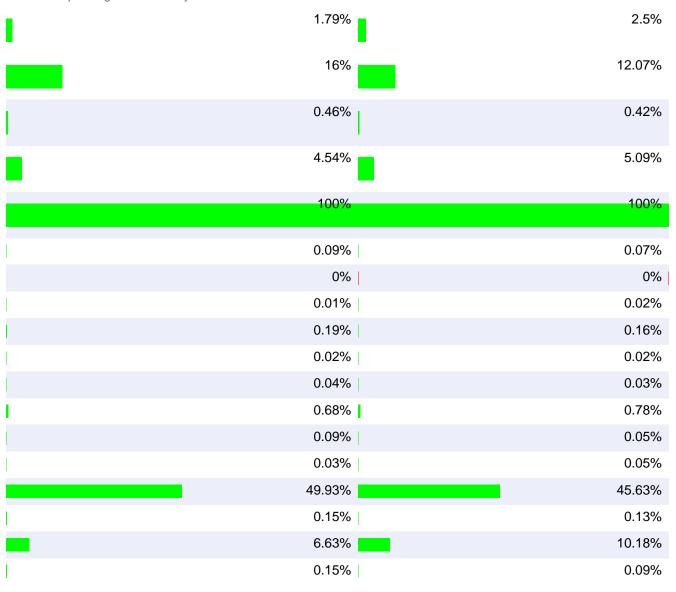
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Based on Spending Breakdown by Claim

\$289.00	\$479.00	\$558.00
\$2579.00	\$2310.00	\$1646.00
\$74.00	\$80.00	\$110.00
\$732.00	\$974.00	\$966.00
\$16121.00	\$19142.00	\$18506.00
\$18.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$1.00	\$4.00	\$7.00
\$36.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$130.00	\$150.00	\$155.00
\$18.00	\$9.00	\$14.00
\$7.00	\$9.00	\$16.00
\$9514.00	\$8735.00	\$9399.00
\$28.00	\$24.00	\$46.00
\$1263.00	\$1949.00	\$1190.00
\$29.00	\$18.00	\$27.00

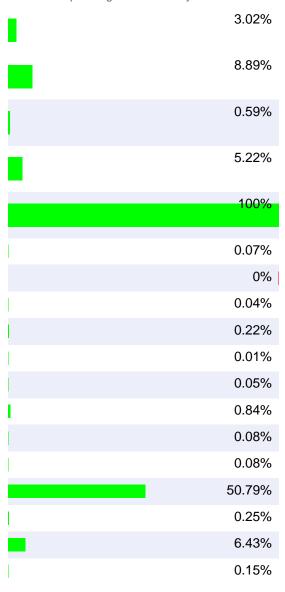
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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

Tacca cir openang Treamachir by Claim		
YALE-NEW HAVEN HOSPITAL	070022	СТ
YALE-NEW HAVEN HOSPITAL	070022	СТ
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	СТ
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	СТ
YALE-NEW HAVEN HOSPITAL	070022	CT
YALE-NEW HAVEN HOSPITAL	070022	СТ
YALE-NEW HAVEN HOSPITAL	070022	CT
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	СТ

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
	<u> </u>

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Based on Spending Breakdown by Claim

\$1833.00 \$1915.00 \$1857.00 \$720.00 \$781.00 \$715.00 \$74.00 \$70.00 \$88.00 \$1988.00 \$1581.00 \$1645.00 \$695.00 \$479.00 \$558.00 \$1611.00 \$2310.00 \$1646.00	\$1833.00
\$74.00 \$70.00 \$88.00 \$1988.00 \$1581.00 \$1645.00 \$695.00 \$479.00 \$558.00	
\$1988.00 \$1581.00 \$1645.00 \$695.00 \$479.00 \$558.00	\$720.00
\$695.00 \$479.00 \$558.00	\$74.00
	\$1988.00
\$1611.00 \$2310.00 \$1646.00	\$695.00
	\$1611.00
\$99.00 \$80.00 \$110.00	\$99.00
\$980.00 \$974.00 \$966.00	\$980.00
\$19055.00 \$19142.00 \$18506.00	\$19055.00
\$12.00 \$13.00 \$14.00	\$12.00
\$0.00 \$0.00 \$1.00	\$0.00
\$4.00 \$4.00 \$7.00	\$4.00
\$51.00 \$31.00 \$40.00	\$51.00
\$2.00 \$3.00 \$3.00	\$2.00
\$10.00 \$7.00 \$9.00	\$10.00
\$144.00 \$150.00 \$155.00	\$144.00
\$8.00 \$9.00 \$14.00	\$8.00
\$3.00 \$9.00 \$16.00	\$3.00
\$8381.00 \$8735.00 \$9399.00	\$8381.00
\$13.00 \$24.00 \$46.00	\$13.00
\$1698.00 \$1949.00 \$1190.00	\$1698.00
\$18.00 \$18.00 \$27.00	\$18.00

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Based on Spending Breakdown by Claim

bacca on openang broakacim by or	ann	
	9.62%	10%
•	3.78%	4.08%
Ī	0.39%	0.37%
	10.44%	8.26%
_	3.65%	2.5%
	8.46%	12.07%
	0.52%	0.42%
	5.14%	5.09%
	100%	100%
	0.07%	0.07%
	0%	0%
	0.02%	0.02%
	0.27%	0.16%
	0.01%	0.02%
	0.06%	0.03%
I	0.77%	0.78%
	0.04%	0.05%
	0.02%	0.05%
	44.83%	45.63%
	0.07%	0.13%
	9.08%	10.18%
	0.09%	0.09%

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Based on Spending Breakdown by Claim

	openang Broanaonn by Glaim
	10.04%
	3.86%
	0.47%
	8.89%
	3.02%
	8.89%
	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
	6.43%
	0.15%

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Based on Spending Breakdown by Claim

WILLIAM W BACKUS HOSPITAL	070024	СТ
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
WILLIAM W BACKUS HOSPITAL	070024	CT
HARTFORD HOSPITAL	070025	СТ

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility

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Based on Spending Breakdown by Claim

\$1852.00	\$1915.00	\$1857.00
\$638.00	\$781.00	\$715.00
\$55.00	\$70.00	\$88.00
\$1733.00	\$1581.00	\$1645.00
\$526.00	\$479.00	\$558.00
\$2377.00	\$2310.00	\$1646.00
\$110.00	\$80.00	\$110.00
\$1059.00	\$974.00	\$966.00
\$18695.00	\$19142.00	\$18506.00
\$9.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$8.00	\$4.00	\$7.00
\$49.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$9.00	\$7.00	\$9.00
\$142.00	\$150.00	\$155.00
\$8.00	\$9.00	\$14.00
\$6.00	\$9.00	\$16.00
\$10225.00	\$8735.00	\$9399.00
\$79.00	\$24.00	\$46.00
\$2085.00	\$1949.00	\$1190.00

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Based on Spending Breakdown by Claim

1		
	9.91%	10%
	3.41%	4.08%
L	0.29%	0.37%
	9.27%	8.26%
	2.81%	2.5%
	12.71%	12.07%
L	0.59%	0.42%
<u> </u>	5.67%	5.09%
	100%	100%
	0.04%	0.07%
	0%	0%
	0.04%	0.02%
I	0.23%	0.16%
İ	0.01%	0.02%
I	0.04%	0.03%
I	0.66%	0.78%
I	0.04%	0.05%
	0.03%	0.05%
	47.64%	45.63%
	0.37%	0.13%
	9.71%	10.18%

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Based on Spending Breakdown by Claim

	10.04%
	3.86%
I	0.47%
_	8.89%
•	3.02%
_	8.89%
I	0.59%
•	5.22%
	100%
	0.07%
	0%
	0.04%
I	0.22%
	0.01%
	0.05%
	0.84%
	0.08%
	0.08%
	50.79%
	0.25%
	6.43%

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Based on Spending Breakdown by Claim

HARTFORD HOSPITAL	070025	СТ
HARTFORD HOSPITAL	070025	СТ
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
HARTFORD HOSPITAL	070025	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient

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Based on Spending Breakdown by Claim

\$21.00 \$2333.00	\$18.00 \$1915.00	\$27.00 \$1857.00
\$783.00	\$781.00	\$715.00
\$50.00	\$70.00	\$88.00
\$1759.00	\$1581.00	\$1645.00
\$461.00	\$479.00	\$558.00
\$2389.00	\$2310.00	\$1646.00
\$88.00	\$80.00	\$110.00
\$959.00	\$974.00	\$966.00
\$21465.00	\$19142.00	\$18506.00
\$19.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$16.00	\$31.00	\$40.00
\$3.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$162.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$5.00	\$9.00	\$16.00
\$7951.00	\$8735.00	\$9399.00
\$13.00	\$24.00	\$46.00

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Based on Spending Breakdown by Claim

	0.1%	0.09%
	10.87%	10%
•	3.65%	4.08%
1	0.23%	0.37%
	8.19%	8.26%
	2.15%	2.5%
	11.13%	12.07%
ľ.	0.41%	0.42%
<u> </u>	4.47%	5.09%
	100%	100%
	0.1%	0.07%
	0.1%	0.07%
	0.1% 0%	0.07% 0%
	0.1% 0% 0%	0.07% 0% 0.02%
	0.1% 0% 0% 0.09%	0.07% 0% 0.02% 0.16%
	0.1% 0% 0% 0.09% 0.01%	0.07% 0% 0.02% 0.16% 0.02%
	0.1% 0% 0% 0.09% 0.01% 0.03%	0.07% 0% 0.02% 0.16% 0.02% 0.03%
	0.1% 0% 0% 0.09% 0.01% 0.03% 0.85%	0.07% 0% 0.02% 0.16% 0.02% 0.03% 0.78%
	0.1% 0% 0% 0.09% 0.01% 0.03% 0.85% 0.02%	0.07% 0% 0.02% 0.16% 0.02% 0.03% 0.78% 0.05%

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Based on Spending Breakdown by Claim

	0.15%
	10.04%
	3.86%
I	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	0.07%
	0.07%
	0.07% 0%
	0.07% 0% 0.04%
	0.07% 0% 0.04% 0.22%
	0.07% 0% 0.04% 0.22% 0.01%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84% 0.08%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84% 0.08%

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Based on Spending Breakdown by Claim

MANCHESTER MEMORIAL HOSPITAL	070027	СТ
MANCHESTER MEMORIAL HOSPITAL	070027	СТ
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
MANCHESTER MEMORIAL HOSPITAL	070027	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	СТ
ST. VINCENT'S MEDICAL CENTER	070028	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient

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Based on Spending Breakdown by Claim

\$2504.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1733.00	\$1915.00	\$1857.00
\$1012.00	\$781.00	\$715.00
\$142.00	\$70.00	\$88.00
\$1181.00	\$1581.00	\$1645.00
\$391.00	\$479.00	\$558.00
\$2883.00	\$2310.00	\$1646.00
\$67.00	\$80.00	\$110.00
\$886.00	\$974.00	\$966.00
\$18996.00	\$19142.00	\$18506.00
\$8.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$9.00	\$4.00	\$7.00
\$24.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$125.00	\$150.00	\$155.00
\$17.00	\$9.00	\$14.00
\$7.00	\$9.00	\$16.00
\$8662.00	\$8735.00	\$9399.00

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Based on Spending Breakdown by Claim

	1	
	13.18%	10.18%
	0.11%	0.09%
	9.12%	10%
	5.33%	4.08%
I	0.75%	0.37%
	6.22%	8.26%
	2.06%	2.5%
	15.18%	12.07%
I	0.35%	0.42%
	4.66%	5.09%
	100%	100%
	100% 0.04%	100% 0.07%
	0.04%	0.07%
	0.04% 0%	0.07% 0%
	0.04% 0% 0.05%	0.07% 0% 0.02%
	0.04% 0% 0.05% 0.12%	0.07% 0% 0.02% 0.16%
	0.04% 0% 0.05% 0.12% 0.03%	0.07% 0% 0.02% 0.16% 0.02%
	0.04% 0% 0.05% 0.12% 0.03% 0.04%	0.07% 0% 0.02% 0.16% 0.02% 0.03%
	0.04% 0% 0.05% 0.12% 0.03% 0.04% 0.65%	0.07% 0% 0.02% 0.16% 0.02% 0.03% 0.78%

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Based on Spending Breakdown by Claim

	6.43%
	0.15%
	10.04%
•	3.86%
I	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	100% 0.07%
	0.07%
	0.07% 0%
	0.07% 0% 0.04%
	0.07% 0% 0.04% 0.22%
	0.07% 0% 0.04% 0.22% 0.01%
	0.07% 0% 0.04% 0.22% 0.01% 0.05%
	0.07% 0% 0.04% 0.22% 0.01% 0.05% 0.84%

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Based on Spending Breakdown by Claim

ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
ST. VINCENT'S MEDICAL CENTER	070028	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice

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Based on Spending Breakdown by Claim

\$12.00	\$24.00	\$46.00
\$1977.00	\$1949.00	\$1190.00
\$18.00	\$18.00	\$27.00
\$2200.00	\$1915.00	\$1857.00
\$758.00	\$781.00	\$715.00
\$55.00	\$70.00	\$88.00
\$1520.00	\$1581.00	\$1645.00
\$487.00	\$479.00	\$558.00
\$2293.00	\$2310.00	\$1646.00
\$89.00	\$80.00	\$110.00
\$1102.00	\$974.00	\$966.00
\$19374.00	\$19142.00	\$18506.00
\$8.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$1.00	\$4.00	\$7.00
\$19.00	\$31.00	\$40.00
\$4.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$163.00	\$150.00	\$155.00
\$4.00	\$9.00	\$14.00
\$1.00	\$9.00	\$16.00

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Based on Spending Breakdown by Claim

based on Spending Breakdown by Claim		
	0.06%	0.13%
	10.2%	10.18%
I	0.09%	0.09%
	11.36%	10%
	3.91%	4.08%
	0.28%	0.37%
	7.85%	8.26%
	2.51%	2.5%
	11.84%	12.07%
I	0.46%	0.42%
	5.69%	5.09%
	100%	100%
	0.05%	0.07%
	0%	0%
	0.01%	0.02%
	0.1%	0.16%
	0.02%	0.02%
	0.04%	0.03%
I	0.89%	0.78%
	0.02%	0.05%
	0.01%	0.05%

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Based on Spending Breakdown by Claim

	-1 3	,	
			0.25%
			6.43%
			0.15%
			10.04%
			3.86%
			0.47%
			8.89%
			3.02%
			8.89%
I			0.59%
			5.22%
			100%
			0.07%
			0%
			0.04%
			0.22%
			0.01%
			0.05%
			0.84%
			0.08%
			0.08%

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Based on Spending Breakdown by Claim

BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	СТ
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
BRISTOL HOSPITAL	070029	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	СТ

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency

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Based on Spending Breakdown by Claim

\$7459.00	\$8735.00	\$9399.00
\$7.00	\$24.00	\$46.00
\$2406.00	\$1949.00	\$1190.00
\$18.00	\$18.00	\$27.00
\$1654.00	\$1915.00	\$1857.00
\$797.00	\$781.00	\$715.00
\$66.00	\$70.00	\$88.00
\$1453.00	\$1581.00	\$1645.00
\$468.00	\$479.00	\$558.00
\$2794.00	\$2310.00	\$1646.00
\$77.00	\$80.00	\$110.00
\$856.00	\$974.00	\$966.00
\$18263.00	\$19142.00	\$18506.00
\$5.00	\$13.00	\$14.00
\$4.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$20.00	\$31.00	\$40.00
\$5.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00
\$109.00	\$150.00	\$155.00
\$9.00	\$9.00	\$14.00

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Based on Spending Breakdown by Claim

40.85%	45.63%
0.04%	0.13%
13.17%	10.18%
0.1%	0.09%
9.05%	10%
4.36%	4.08%
0.36%	0.37%
7.96%	8.26%
2.56%	2.5%
15.3%	12.07%
0.42%	0.42%
4.69%	5.09%
100%	100%
0.03%	0.07%
0.02%	0%
0%	0.02%
0.12%	0.16%
0.03%	0.02%
0.04%	0.03%
0.63%	0.78%
0.05%	0.05%

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Based on Spending Breakdown by Claim

	50.79%
l	0.25%
	6.43%
	0.15%
	10.04%
•	3.86%
I	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
•	5.22%
	100%
	0.07%
	0%
	0.04%
Ī	0.22%
	0.01%
	0.05%
I	0.84%
	0.08%

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Based on Spending Breakdown by Claim

GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	СТ
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
GRIFFIN HOSPITAL	070031	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	СТ

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier

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Based on Spending Breakdown by Claim

\$6.00	\$9.00	\$16.00
\$7363.00	\$8735.00	\$9399.00
\$10.00	\$24.00	\$46.00
\$2037.00	\$1949.00	\$1190.00
\$14.00	\$18.00	\$27.00
\$1712.00	\$1915.00	\$1857.00
\$648.00	\$781.00	\$715.00
\$132.00	\$70.00	\$88.00
\$1525.00	\$1581.00	\$1645.00
\$382.00	\$479.00	\$558.00
\$2451.00	\$2310.00	\$1646.00
\$71.00	\$80.00	\$110.00
\$918.00	\$974.00	\$966.00
\$17430.00	\$19142.00	\$18506.00
\$10.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$30.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$8.00	\$7.00	\$9.00
\$123.00	\$150.00	\$155.00

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Based on Spending Breakdown by Claim

	0.03%	0.05%
	42.24%	45.63%
	0.06%	0.13%
	11.69%	10.18%
	0.08%	0.09%
	9.82%	10%
	3.72%	4.08%
	0.75%	0.37%
	8.75%	8.26%
	2.19%	2.5%
	14.06%	12.07%
	0.41%	0.42%
	5.27%	5.09%
	100%	100%
	0.05%	0.07%
	0%	0%
	0%	0.02%
	0.16%	0.16%
	0.01%	0.02%
	0.04%	0.03%
I	0.67%	0.78%

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Based on Spending Breakdown by Claim

1	0.08%
	50.79%
1	0.25%
•	6.43%
1	0.15%
	10.04%
	3.86%
I	0.47%
	8.89%
•	3.02%
	8.89%
İ	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.050/
	0.05%

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Based on Spending Breakdown by Claim

DANBURY HOSPITAL	070033	СТ
DANBURY HOSPITAL	070033	СТ
DANBURY HOSPITAL	070033	СТ
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	СТ
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	СТ
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	СТ
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
DANBURY HOSPITAL	070033	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	СТ

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment

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Based on Spending Breakdown by Claim

\$10.00	\$9.00	\$14.00
\$10.00	\$9.00	\$16.00
\$8214.00	\$8735.00	\$9399.00
\$12.00	\$24.00	\$46.00
\$2104.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1861.00	\$1915.00	\$1857.00
\$594.00	\$781.00	\$715.00
\$88.00	\$70.00	\$88.00
\$1421.00	\$1581.00	\$1645.00
\$536.00	\$479.00	\$558.00
\$2247.00	\$2310.00	\$1646.00
\$94.00	\$80.00	\$110.00
\$960.00	\$974.00	\$966.00
\$18343.00	\$19142.00	\$18506.00
\$21.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$3.00	\$4.00	\$7.00
\$46.00	\$31.00	\$40.00
\$1.00	\$3.00	\$3.00
\$7.00	\$7.00	\$9.00

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Based on Spending Breakdown by Claim

- Dased on Spending Dreakdown by Claim	_	
I		
	0.06%	0.05%
	0.06%	0.05%
	44.78%	45.63%
	0.06%	0.13%
	11.47%	10.18%
	0.11%	0.09%
	10.15%	10%
	3.24%	4.08%
I	0.48%	0.37%
_	7.74%	8.26%
	2.92%	2.5%
	12.25%	12.07%
1	0.51%	0.42%
	5.23%	5.09%
	100%	100%
	0.11%	0.07%
	0%	0%
	0.02%	0.02%
1	0.24%	0.16%
	0.01%	0.02%
	0.03%	0.03%

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Based on Spending Breakdown by Claim

I	
	0.08%
	0.08%
	50.79%
l	0.25%
	6.43%
	0.15%
	10.04%
•	3.86%
I	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.05%

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Based on Spending Breakdown by Claim

NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	CT
NORWALK HOSPITAL ASSOCIATION	070034	СТ
NORWALK HOSPITAL ASSOCIATION	070034	CT
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient

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Based on Spending Breakdown by Claim

\$166.00	\$150.00	\$155.00
\$6.00	\$9.00	\$14.00
\$6.00	\$9.00	\$16.00
\$9531.00	\$8735.00	\$9399.00
\$93.00	\$24.00	\$46.00
\$1537.00	\$1949.00	\$1190.00
\$20.00	\$18.00	\$27.00
\$1855.00	\$1915.00	\$1857.00
\$739.00	\$781.00	\$715.00
\$98.00	\$70.00	\$88.00
\$1656.00	\$1581.00	\$1645.00
\$565.00	\$479.00	\$558.00
\$2064.00	\$2310.00	\$1646.00
\$88.00	\$80.00	\$110.00
\$1146.00	\$974.00	\$966.00
\$19651.00	\$19142.00	\$18506.00
\$8.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00

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Based on Spending Breakdown by Claim

based of Spending Breakdown by Claim		
	I	
T.	0.84%	0.78%
	0.03%	0.05%
	0.03%	0.05%
	48.5%	45.63%
1	0.48%	0.13%
	7.82%	10.18%
	0.1%	0.09%
	9.44%	10%
•	3.76%	4.08%
İ	0.5%	0.37%
	8.43%	8.26%
•	2.88%	2.5%
	10.5%	12.07%
İ	0.45%	0.42%
	5.83%	5.09%
	100%	100%
	0.05%	0.07%
	0%	0%
	0%	0.02%

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Based on Spending Breakdown by Claim

1	
I	0.84%
	0.08%
1	0.08%
	50.79%
1	0.25%
	6.43%
	0.15%
	10.04%
	3.86%
I	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%

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Based on Spending Breakdown by Claim

CONNECTICUT		
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ

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Based on Spending Breakdown by Claim

1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency

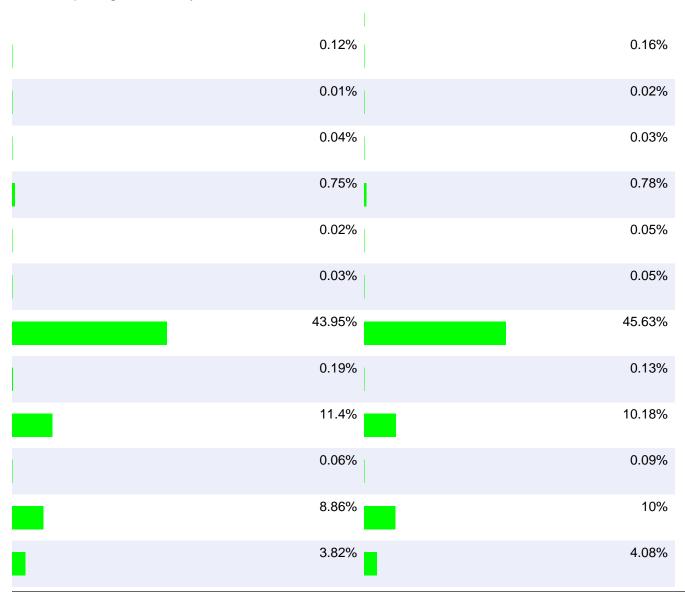
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Based on Spending Breakdown by Claim

\$21.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$6.00	\$7.00	\$9.00
\$128.00	\$150.00	\$155.00
\$3.00	\$9.00	\$14.00
\$5.00	\$9.00	\$16.00
\$7544.00	\$8735.00	\$9399.00
\$33.00	\$24.00	\$46.00
\$1956.00	\$1949.00	\$1190.00
\$11.00	\$18.00	\$27.00
\$1521.00	\$1915.00	\$1857.00
\$655.00	\$781.00	\$715.00

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Based on Spending Breakdown by Claim



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Based on Spending Breakdown by Claim

0.22% 0.01% 0.05% 0.84% 0.08% 0.08% 50.79% 0.25% 6.43% 0.15% 10.04% 3.86%

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Based on Spending Breakdown by Claim

THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
THE HOSPITAL OF CENTRAL CONNECTICUT	070035	СТ
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	СТ

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Based on Spending Breakdown by Claim

Date of Spending Broakdown by Claim	
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
Duving Index Heavital Admission	11 11 1/1 8
During Index Hospital Admission	Home Health Agency

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Based on Spending Breakdown by Claim

\$66.00	\$70.00	\$88.00
\$1613.00	\$1581.00	\$1645.00
\$481.00	\$479.00	\$558.00
\$2151.00	\$2310.00	\$1646.00
\$62.00	\$80.00	\$110.00
\$897.00	\$974.00	\$966.00
\$17164.00	\$19142.00	\$18506.00
\$22.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$27.00	\$31.00	\$40.00
\$2.00	\$3.00	\$3.00
\$5.00	\$7.00	\$9.00
\$146.00	\$150.00	\$155.00
\$10.00	\$9.00	\$14.00
\$6.00	\$9.00	\$16.00

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0.37%
8.26%
2.5%
12.07%
0.42%
5.09%
100%
0.07%
0%
0.02%
0.16%
0.02%
0.03%
0.78%
0.05%
0.05%

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Based on Spending Breakdown by Claim

	0.47%
	8.89%
I	3.02%
	8.89%
	0.59%
	5.22%
	100%
	0.07%
	0.07%
	0.07%
	0.07% 0%
	0.07% 0% 0.04%
	0.07% 0% 0.04% 0.22%
	0.07% 0% 0.04% 0.22% 0.01%
	0.07% 0% 0.04% 0.22% 0.01% 0.05%

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Based on Spending Breakdown by Claim

Table of openianing Treatment by Claim		
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
JOHN DEMPSEY HOSPITAL	070036	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency
During Index Hospital Admission	Hospice

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Based on Spending Breakdown by Claim

		based off Speriding Dreakdown by Claim
\$9399.00	\$8735.00	\$9308.00
\$46.00	\$24.00	\$19.00
\$1190.00	\$1949.00	\$1892.00
\$27.00	\$18.00	\$22.00
\$1857.00	\$1915.00	\$1644.00
\$715.00	\$781.00	\$953.00
\$88.00	\$70.00	\$41.00
\$1645.00	\$1581.00	\$1711.00
\$558.00	\$479.00	\$651.00
\$1646.00	\$2310.00	\$2277.00
\$110.00	\$80.00	\$140.00
\$966.00	\$974.00	\$852.00
\$18506.00	\$19142.00	\$19729.00
\$14.00	\$13.00	\$23.00
\$1.00	\$0.00	\$0.00
\$7.00	\$4.00	\$31.00
\$40.00	\$31.00	\$140.00
\$3.00	\$3.00	\$0.00
\$9.00	\$7.00	\$8.00
\$155.00	\$150.00	\$204.00
\$14.00	\$9.00	\$15.00
\$16.00	\$9.00	\$0.00

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Based on Spending Breakdown by Claim

0.12% 0.07% 0% 0% 0.17% 0.02% 0.76% 0.16%	based on Spending Breakdown by Claim		
9.59% 10.18% 0.09% 0.09% 0.09% 8.33% 10% 10% 4.83% 100% 0.21% 0.37% 8.67% 8.66% 3.33% 12.55% 11.54% 12.07% 0.71% 0.71% 0.42% 12.07% 0.71% 0.72% 100% 100% 0.12% 0.07% 0.07% 0.07% 0.07% 0.07% 0.07% 0.00% 0.		47.18%	45.63%
0.11% 0.09% 8.33% 10% 4.83% 4.08% 0.21% 0.37% 8.67% 8.26% 3.3% 2.5% 11.54% 12.07% 0.71% 0.42% 4.32% 5.09% 100% 100% 0.12% 0.07% 0% 0% 0.17% 0.02% 0.76% 0.16%		0.09%	0.13%
8.33% 10% 4.83% 4.08% 0.21% 0.37% 8.67% 8.26% 3.3% 2.5% 11.54% 12.07% 0.71% 0.42% 4.32% 5.09% 100% 100% 0.12% 0.07% 0% 0% 0.17% 0.02% 0.76% 0.16%		9.59%	10.18%
4.83% 4.08% 0.21% 0.37% 8.67% 8.26% 8.26% 11.54% 12.07% 0.42% 4.32% 5.09% 100% 0.12% 0.07% 0.07% 0.07% 0.07% 0.07% 0.07% 0.07% 0.07% 0.00%		0.11%	0.09%
0.21% 0.37% 8.66% 8.26% 8.26% 3.3% 2.5% 11.54% 12.07% 0.42% 5.09% 100% 100% 0.12% 0.07% 0.07% 0.07% 0.07% 0.00%		8.33%	10%
8.67% 8.26% 3.3% 2.5% 11.54% 12.07% 0.71% 0.42% 4.32% 5.09% 100% 100% 0.12% 0.07% 0% 0% 0.17% 0.02% 0.76% 0.16%		4.83%	4.08%
0.71% 0.42%		0.21%	0.37%
0.71% 0.42% 4.32% 5.09% 100% 100% 0.12% 0.07% 0% 0% 0.17% 0.02% 0.76% 0.16%		8.67%	8.26%
0.71% 0.42%		3.3%	2.5%
0.71% 0.42%		11.54%	12.07%
100% 100% 0.12% 0.07% 0% 0% 0.17% 0.02% 0.76% 0.16%		0.71%	0.42%
0.12% 0.07% 0% 0% 0.17% 0.02% 0.76% 0.16%		4.32%	5.09%
0% 0% 0.17% 0.02% 0.76% 0.16%		100%	100%
0.17% 0.02% 0.76% 0.16%		0.12%	0.07%
0.76%		0%	0%
		0.17%	0.02%
0% 0.02%		0.76%	0.16%
		0%	0.02%
0.04%		0.04%	0.03%
1.1%		1.1%	0.78%
0.08%		0.08%	0.05%
0% 0.05%		0%	0.05%

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Based on Spending Breakdown by Claim

	Wil by Claim
	50.79%
l	0.25%
	6.43%
	0.15%
	10.04%
	3.86%
1	0.47%
	8.89%
	3.02%
	8.89%
Ī	0.59%
	5.22%
	100%
	0.07%
	0%
	0.04%
	0.22%
	0.01%
	0.05%
1	0.84%
	0.08%
	0.08%

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Based on Spending Breakdown by Claim

MASONIC HOME AND HOSPITAL	070039	СТ
MASONIC HOME AND HOSPITAL	070039	СТ
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
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MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
MASONIC HOME AND HOSPITAL	070039	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total
1 to 3 days Prior to Index Hospital Admission	Home Health Agency
1 to 3 days Prior to Index Hospital Admission	Hospice
1 to 3 days Prior to Index Hospital Admission	Inpatient
1 to 3 days Prior to Index Hospital Admission	Outpatient
1 to 3 days Prior to Index Hospital Admission	Skilled Nursing Facility
1 to 3 days Prior to Index Hospital Admission	Durable Medical Equipment
1 to 3 days Prior to Index Hospital Admission	Carrier
During Index Hospital Admission	Home Health Agency

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Based on Spending Breakdown by Claim

\$5534.00	\$8735.00	\$9399.00
\$267.00	\$24.00	\$46.00
\$3318.00	\$1949.00	\$1190.00
\$6.00	\$18.00	\$27.00
\$1156.00	\$1915.00	\$1857.00
\$852.00	\$781.00	\$715.00
\$242.00	\$70.00	\$88.00
\$1836.00	\$1581.00	\$1645.00
\$185.00	\$479.00	\$558.00
\$3521.00	\$2310.00	\$1646.00
\$26.00	\$80.00	\$110.00
\$1193.00	\$974.00	\$966.00
\$18555.00	\$19142.00	\$18506.00
\$26.00	\$13.00	\$14.00
\$0.00	\$0.00	\$1.00
\$0.00	\$4.00	\$7.00
\$18.00	\$31.00	\$40.00
\$0.00	\$3.00	\$3.00
\$0.00	\$7.00	\$9.00
\$91.00	\$150.00	\$155.00
\$0.00	\$9.00	\$14.00

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Based on Spending Breakdown by Claim

29.82%	45.63%
1.44%	0.13%
17.88%	10.18%
0.03%	0.09%
6.23%	10%
4.59%	4.08%
1.3%	0.37%
9.9%	8.26%
1% 📘	2.5%
18.97%	12.07%
0.14%	0.42%
6.43%	5.09%
100%	100%
0.16%	0.07%
0%	0%
0%	0.02%
0.11%	0.16%
0%	0.02%
0%	0.03%
0.56%	0.78%
0%	0.05%

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Based on Spending Breakdown by Claim

	50.79%
	0.25%
	6.43%
	0.15%
	10.04%
	3.86%
I	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%
	0.07%
	0.07% 0%
	0%
	0% 0.04%
	0% 0.04% 0.22%
	0% 0.04% 0.22% 0.01%

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Based on Spending Breakdown by Claim

HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT
HEBREW HOME AND HOSPITAL INC	070040	CT

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Based on Spending Breakdown by Claim

During Index Hospital Admission	Hospice
During Index Hospital Admission	Inpatient
During Index Hospital Admission	Outpatient
During Index Hospital Admission	Skilled Nursing Facility
During Index Hospital Admission	Durable Medical Equipment
During Index Hospital Admission	Carrier
1 through 30 days After Discharge from Index Hospital Admission	Home Health Agency
1 through 30 days After Discharge from Index Hospital Admission	Hospice
1 through 30 days After Discharge from Index Hospital Admission	Inpatient
1 through 30 days After Discharge from Index Hospital Admission	Outpatient
1 through 30 days After Discharge from Index Hospital Admission	Skilled Nursing Facility
1 through 30 days After Discharge from Index Hospital Admission	Durable Medical Equipment
1 through 30 days After Discharge from Index Hospital Admission	Carrier
Complete Episode	Total

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Based on Spending Breakdown by Claim

\$0.00	\$9.00	\$16.00
\$5687.00	\$8735.00	\$9399.00
\$225.00	\$24.00	\$46.00
\$2937.00	\$1949.00	\$1190.00
\$2.00	\$18.00	\$27.00
\$899.00	\$1915.00	\$1857.00
\$741.00	\$781.00	\$715.00
\$246.00	\$70.00	\$88.00
\$1190.00	\$1581.00	\$1645.00
\$361.00	\$479.00	\$558.00
\$3120.00	\$2310.00	\$1646.00
\$18.00	\$80.00	\$110.00
\$660.00	\$974.00	\$966.00
\$16222.00	\$19142.00	\$18506.00

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Based on Spending Breakdown by Claim

	0%	0.05%
	35.06%	45.63%
I	1.39%	0.13%
	18.11%	10.18%
	0.01%	0.09%
	5.54%	10%
	4.57%	4.08%
I	1.51%	0.37%
	7.34%	8.26%
	2.23%	2.5%
	19.23%	12.07%
	0.11%	0.42%
	4.07%	5.09%
	100%	100%

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Based on Spending Breakdown by Claim

	0.08%
	50.79%
	0.25%
	6.43%
	0.15%
	10.04%
	3.86%
	0.47%
	8.89%
	3.02%
	8.89%
I	0.59%
	5.22%
	100%

Page 175 of 175 08/15/2012